PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

C Ø

_Please type a plus sign (+) inside this bo

UTILITY
PATENT APPLICATION
TRANSMITTAL

t or 1000, no persons	a.o.oqaoo	10.000				
Attorney Docket No.		42390P11444				
First Inventor	Moha	ın J. Kumar				
Title A Platfo	rm and M	ethod for Representing and Supporting Hot-Plugged Nodes				
Express Mail I	abel No.	EI 80287322011S				

	(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail	Label No.	EL802873229US				
	O APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents			Assistant Commissioner for Box Patent Application				
	1. Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing) 2. Applicant claims small entity status. See 37 CFR 1.27. 3. Specification [Total Pages 2] (preferred arrangement set forth below) - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 4. Drawing(s) (35 U.S.C. 113) [Total Sheets 6] 5. Oath or Declaration [Total Pages 4] a. Newly executed (original or copy) b. Copy from a prior application (37 C.F.R.) (for continuation/divisional with Box 18 co	23]	ADDRESS TO: Box Patent Application Washington, DC 20231 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. paper c. Statements verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. Assignment Papers (cover sheet & document(s)) 10. 37 C.F.R. § 3.73(b) Statement (when there is an assignee) 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
	i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 6. Application Data Sheet. See 37 CFR 1.76	\$)		2)(B)(i). alent.				
		box, and suptinuation-in-pa	supply the requisite information below and in a preliminary amendment: part (CIP) of prior application No:					
1	Prior application Information: Examiner For CONTINUATION OR DIVISIONAL APPS only: The entire of Box 5b, is considered a part of the disclosure of the accomp The incorporation can only be relied upon when a portion has	anying continu	uation or divi	isional application and is hereby incorporated by refe	d under erence.			
		CORRESPO						
	☑ . Customer Number of Bar Code Label	08 PATENT TRA	791 ADEMARK OFFI	or Correspondence add	ress below			
	Name							
	Address							
	City	Ste		Zip Code				
	Country	Telephone		Fax				
	Name (Print/Type) William W. Schaal			Registration No. (Attorney/Agent) 39,01	.8			

FEE TRANSMITTAL for FY 2000

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

Signature

(\$)	1,212.00
(4)	1,212.00

Complete if Known					
Application Number					
Filing Date	June 29, 2001				
First Named Inventor	Mohan J. Kumar				
Examiner Name		-			
Group/Art Unit					
Attorney Docket No.	42390P11444				

Date

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)							
1. The Commissioner is hereby authorized to charge	3. ADDITIONAL FEE							
indicated fees and credit any overpayments to:	Large Entity Small Entity							
Account Number 02-2666	Fee	Fee	Fee	Fee	•	Description		Fee Paid
Deposit	Code	(\$)	Code	(\$)				
Account Name Blakely, Sokoloff, Taylor & Zafman LLP	105 127	130 50	205 227		Surcharge - late Surcharge - late			
Charge Any Additional Fee(s) Required Under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.		400	400	400	cover sheet.	-10		
	139 147	130 2,520	139 147		Non-English spe For filing a reque		ination	
Applicant claims small entity status. See 37 CFR 1.27.	112	920*	112	_,	*Requesting publ Examiner action	lication of SIR		
2. Payment Enclosed:	113	1,840*	113	1,840	*Requesting publ	lication of SIR	after	
Check Credit card Order Other	145	440	215	55	Examiner action Extension for res		firet month	
FEE CALCULATION	115 116	110 390	215 216		Extension for res	•		<u> </u>
	1	890	217		Extension for res			
Recording	117	1,390	217		Extension for res	•		
Large Entity Small Entity Fee Fee Fee Fee Description Fee Paid	ľ	1,390	228		Extension for res	•		
l Code /5) Code /5)	119	310	219		Notice of Appea		marmonar	
101 710 201 355 Utility filing fee 710.00	120	310	220		Filing a brief in s		anneal	
106 320 206 160 Design filing fee	121	270	221		Request for oral	• •	аррош.	
107 490 207 245 Plant filing fee		1,510			Petition to institu	_	e proceeding	
5 108 710 208 355 Reissue filing fee	140	110	240	•	Petition to revive	•		
114 150 214 75 Provisional filing fee		1,240	241		Petition to revive			
SUBTOTAL (1) (\$) 710.00		1,240	242		Utility issue fee		ω.	
2. EXTRA CLAIM FEES Extra Fee from	143	440	243		Design issue fee	•		
2. EXTRA CLAIM FEES Extra Fee from Claims below	144	600	244		Plant issue fee			
Total Claims 39 - 20 = 19 X 18.00 = \$342.00	122	130	122		Petitions to the	Commissioner		
Independent 5 - 3**= 2 X 80.00 = \$160.00	123	50	123		Petitions related			
Multiple Dependent =	126	180	126		Submission of Ir	•		
**or number previously paid, if greater, For Reissues, see below	581	40	581		Recording each			
Large Entity Small Entity					property (times r			
Fee Fee Fee Fee Description	146	710	246		Filing a submissi		rejection	
Code (\$) Code (\$)	440	740	040		(37 CFR § 1.129 For each addition		e ho	
103 18 203 9 Claims in excess of 20	149	710	249		examined (37 Cl			
102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple Dependent claim, if not paid	179	710	279		Request for Con			
104 270 204 135 Multiple Dependent claim, if not paid 109 80 209 40 **Reissue independent claims	169	900	169	900	Request for expe	edited examin	ation	
over original patent					of a design appli	cation		
110 18 210 9 **Reissue claims in excess of 20 and		fee (spe						
over original patent		fee (spe ed by Bas	-		id CI	IDTOTAL (2)	(¢)	
SUBTOTAL (2) (\$) 502.00	Reduc	cu uy bas	⊷rwy	- cc ra		JBTOTAL (3)	(\$)	
SUBMITTED BY Complete (if applicable						ble)		
Name (Prinl/Type) William W. Schaal		egistratio tomey/Age		3	9,018	Telephone	(714) 557	
Signature						Date	06/29/	/01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.